



## AFFIDAVIT OF NON-USE

VEHICLE IDENTIFICATION NUMBER	LICENSE PLATE NO	MAKE	YEAR MODEL

Effective on \_\_\_\_\_, the above described vehicle is not being operated or parked on any California roadway so as to require evidence of financial responsibility. I understand that if the vehicle is operated or parked on a California roadway prior to complying with all applicable registration and financial responsibility laws, I will be subject to citation.

***I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.***

PRINTED LAST NAME	FIRST NAME	MIDDLE NAME	DAYTIME TELEPHONE NUMBER (   )
SIGNATURE			DATE

X

Please return this form to: Department of Motor Vehicles  
Vehicle Registration Financial Responsibility Program  
PO Box 997405  
Sacramento, CA 95899-7405

For more information please contact the Vehicle Registration Financial Responsibility Program at 1-866-664-4545.

REG 5090 (NEW 11/2006) WWW



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